



**2009-2010 Ambulatory Surgery Center (ASC) Health Care Worker
Seasonal Influenza Vaccination Questions to be Incorporated into the 2009
Maryland Freestanding Ambulatory Surgical Facility Survey**

The vaccination of health care workers for seasonal influenza is a process of care measure prioritized by the Maryland Health Care Commission's (MHCC) Healthcare-Associated Infections Advisory Committee. Beginning with the 2009 Maryland Freestanding Ambulatory Surgical Facility Survey, MHCC requires all ambulatory surgical centers to report data on all paid, full-time and part-time employees who received FluMist® or injectable seasonal influenza vaccine (excluding Novel H1N1) on-site or off-site. For the 2009 Maryland Freestanding Ambulatory Surgical Facility Survey, the reporting period for this measure will be September 1, 2009 through April 15, 2010.

The questions designed to collect information on HCW vaccination rates and the measure calculations are included on the attached document.

For additional information on this data collection activity, please refer to the Frequently Asked Questions document also available on the MHCC website at http://mhcc.maryland.gov/healthcare_associated_infections/hai/influenzafaqs0410.pdf

If you have questions regarding these reporting requirements, please contact Eileen Witherspoon at ewitherspoon@mhcc.state.md.us.

Seasonal Influenza Vaccination (Excluding Novel H1N1) for Ambulatory Surgery Center Health Care Workers

Category		Number of Ambulatory Surgery Center Health Care Workers
#1	Total number of full-time and part-time ambulatory surgery center employees as of April 16, 2010	
#2	Number of full-time and part-time ambulatory surgery center employees who received FluMist® or a seasonal influenza shot on-site or off-site between September 1, 2009 and April 15, 2010	
#3	Number of full-time and part-time ambulatory surgery center employees who did not receive FluMist® or a seasonal influenza shot on-site or off-site between September 1, 2009 and April 15, 2010 due to medical contraindications (including a severe egg allergy, severe allergy to any vaccine component, severe reaction after a previous dose of influenza vaccine, or a history of Guillain-Barre Syndrome)	
#4	Number of full-time and part-time ambulatory surgery center employees who did not receive FluMist® or a seasonal influenza shot on-site or off-site between September 1, 2009 and April 15, 2010 due to religious objections	
#5	Number of full-time and part-time ambulatory surgery center employees who did not receive FluMist® or a seasonal influenza shot on-site or off-site between September 1, 2009 and April 15, 2010 due to other objections	

Measures and Calculation

- Adherence Rate for Receiving Influenza Vaccination by All Medically Eligible HCW**

Calculation:
$$\frac{\text{Data Item \#2}}{\text{Data Item \#1} - \text{Data Item \#3}}$$

- Declination Rate Due to Medical Contraindications for Influenza Vaccination**

Calculation:
$$\frac{\text{Data Item \#3}}{\text{Data Item \#1}}$$

- Declination Rate Due to Non-Medical Contraindications for Influenza Vaccination**

Calculation:
$$\frac{\text{Data Item \#4} + \text{Data Item \#5}}{\text{Data Item \#1}}$$

- Declination Rate Due to All Reasons (Medical and Non-Medical) for All HCW**

Calculation:
$$\frac{\text{Data Item \#3} + \text{Data Item \#4} + \text{Data Item \#5}}{\text{Data Item \#1}}$$